Ideas that change health and care

Workforce race inequalities and inclusion in NHS providers

Overview

- Despite having one of the most ethnically diverse workforces in the public sector, there are long-standing race inequalities issues in the NHS workforce, including a lack of ethnic minority representation at senior levels, ethnic minority staff being much more likely to report they have experienced discrimination at work than white staff, and fewer ethnic minority staff reporting their trust offers equal opportunities for career progression.
- Our research explored how three NHS provider organisations have sought to address workforce race inequalities and develop positive and inclusive working environments.
- The three case studies were beginning to address race inequalities and inclusion by introducing interventions to make it safer to talk about race-related issues and interventions to enable development and career progression for ethnic minority staff.
- This type of cultural change was complex, multi-faceted and took time, but staff at each site described how the interventions and the focus on race inequalities and inclusion had started to change their working environments for the better.
- Drawing on the experiences and reflections of those involved in addressing race inequalities and inclusion in the three case studies, we offer a few key learning points and questions to encourage others to reflect their own organisation's approaches to working on race equality and inclusion.
- We hope this report will help readers in NHS organisations as they design or implement their own local approaches to creating fairer workplaces.
- We want this report to provoke conversations about the structural and personal aspects of race inequality, and to serve as the starting point for organisations' own deeper explorations of how they are thinking about it and working on it.

Background

The NHS has one of the most ethnically diverse workforces in the public sector. However, year after year, ethnic minority staff report worse experiences in terms of their lives and careers, when compared with white staff and people from an ethnic minority background are under-represented in senior positions in the NHS.

Addressing race inequalities in the NHS workforce is critical on multiple levels. Experiences of discrimination can cast a long shadow on ethnic minority NHS staff; the impact on people can be profound (*see* www.kingsfund.org.uk/nhs-stories for powerful first-person accounts collected in connection with this research).

There are also wider implications for the health service: evidence shows that fair treatment of staff is linked to a better experience of care for patients. Moreover, the NHS is in the midst of a workforce crisis and improving its performance on diversity and inclusion will play an important role in the NHS becoming a better place to work and build a career.

Our research

Our research, which was carried out before the Covid-19 pandemic, looked at how three NHS case studies have sought to address workforce race inequalities and develop positive and inclusive working environments. We have focused on the personal accounts and recollections of members of staff. This helped us to understand the reality and complexity of culture change.

We selected three NHS trusts where there are promising signs of positive change in terms of race inequalities and inclusion: Bradford District Care NHS Foundation Trust, Calderdale and Huddersfield NHS Foundation Trust and East London NHS Foundation Trust. In each trust, we interviewed a range of individuals, including:

- members of staff (a combination of those directly involved in race equality work and those not)
- Freedom to Speak Up Guardians
- a local trade union representative
- an organisation development manager
- equality, diversity and inclusion managers or leads
- board members (typically the chief executive and director of human resources)
- any relevant external stakeholders.

A combination of face-to-face and telephone interviews were carried out between September and November 2019. We asked participants to give their reflections on the current culture within their organisation; the specific actions that have been taken to address equality, diversity and inclusion; and what they had learnt from the experience.

Our findings

All three case studies implemented similar interventions aimed at addressing race inequalities and inclusion, including:

- establishing staff networks
- ensuring psychologically safe routes for raising concerns (specifically by appointing Freedom to Speak Up Guardians)
- enabling staff development and career progression.

In combination, these interventions could support ethnic minority staff in feeling their organisations were committing to making positive changes. People told us what had changed for them personally and how they could see a shift taking place around them, with increased awareness about the challenges affecting ethnic minority staff in the workplace. More qualitative data on staff experience would offer essential indications of how change is felt.

The implementation of these interventions was largely perceived as beneficial, however we observed there was potential for some staff to react negatively to them. The interventions made it safer to talk about race, but this inevitably raised some ugly truths about behaviours between colleagues. Leaders at all levels play an important role in supporting and resourcing race equality and inclusion initiatives and addressing resistance and issues as and when they occur.

It was clear from the case study sites that everyone has a role to play in an organisation's race equality and inclusion effort – through leadership, participation or allyship. If making workplaces more inclusive really is everyone's responsibility, then leaders need to think about how the design and implementation of strategies or interventions model the principles of inclusion. Leadership for race equality and inclusion is an ongoing activity that creates an emotional burden. Leaders may need support, for example through peer networks or supervision.

Key learning to consider

Although each organisation's approach to addressing race inequalities and inclusion will be defined and designed locally depending on the circumstances, the case studies offer some key learning points for the rest of the sector to consider.

- There are no magic solutions to an age-old issue. The experiences in the three NHS organisations reflects the reality of working towards race equality: to date, it has not been easy, quick or straightforward.
- Approaches to race equality and inclusion are not 'one size fits all'. There is a lack of proven interventions and it is down to individuals and organisations making a concerted effort at a local level to iterate the approach that 'works' for them.
- Addressing inequalities and inclusion needs to be an ongoing, 'moment-bymoment' activity that engages with and responds to people's lived experiences.

To read the full report, Workforce race inequalities and inclusion in NHS providers, please visit www.kingsfund.org.uk/publications/workforce-race-inequalities-inclusion-nhs

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